



July 2005 UMP Guide to Preferred Drugs

Uniform Medical Plan (UMP) provides access to quality health care at an affordable price. UMP uses the *UMP Preferred Drug List* to help manage the overall cost of providing prescription drug benefits to UMP PPO and UMP Neighborhood enrollees. The *UMP Preferred Drug List* includes drugs from the *Washington State Preferred Drug List* and drugs from the *Express Scripts National Preferred Formulary*. It offers a wide range of medications to choose from and is reviewed regularly by an independent group of practicing health care providers to help ensure that the content is medically sound and supportive of your health.

Development and maintenance of the preferred drug list is a dynamic process. The Washington Pharmacy & Therapeutics (P&T) Committee staffed by licensed health care professionals was established by the legislature to develop the *Washington State Preferred Drug List* based on clinical evidence and criteria for safe, effective, and appropriate prescribing. The P&T Committee meets quarterly to review the *Washington State Preferred Drug List* and additional drug classes to ensure that the preferred drug list remains responsive to the needs of patients and providers. Once these reviews are completed, the *UMP Preferred Drug List* may change based on the P&T Committee's recommendations. UMP retains the right to update the *UMP Preferred Drug List* or shift medications to different tiers during the year if generic or over-the-counter alternatives become available; or if there are changes to the *Washington State Preferred Drug List* or the *Express Scripts National Preferred Formulary*. Enrollees will be notified of changes to the *UMP Preferred Drug List* by quarterly mailings.

This Guide lists **only** the most commonly prescribed medications, and was printed in the summer of 2005, so it is the information current at that time. For a complete up-to-date listing of the *UMP Preferred Drug List*, please visit the UMP Web site at www.ump.hca.wa.gov, or contact Member Services at 1-866-576-3862.

Summary of the UMP Prescription Drug Benefit

With your UMP prescription drug coverage, all prescription drugs are subject to an annual prescription drug deductible whether purchased through our mail-service pharmacy or at a retail pharmacy. After the prescription deductible has been satisfied, your cost for a prescription drug will vary according to whether you purchase it from a UMP network pharmacy or mail service, plus a number of other factors, including whether the drug is a generic, preferred, or nonpreferred drug. Each of these categories has a different enrollee cost-share tier, as shown in the table below.

Covered Drugs

Medications will be eligible for coverage only if they are FDA-approved medications used for non-experimental indications. Non-experimental indications include the labeled indications (FDA-approved) and other indications accepted as effective by the balance of currently available scientific evidence and informed professional opinion. Experimental and investigational drugs, and drugs used for cosmetic purposes, are not eligible for coverage.

This benefit covers legend drugs (those that can be legally obtained only with a prescription) including:

- Allergy Antigens
- Chemotherapeutic agents
- Contraceptive Drugs
- Fluoride (for preschool children over 6 months of age when primary water source is deficient in fluoride)
- Injections of certain prescription medications
- Methadone
- Prenatal vitamins (during pregnancy)

Excluded Drugs

- Drugs to treat impotence
- Drugs to treat infertility
- Dietary supplements (vitamins, minerals, herbal supplements)
- Drugs used for cosmetic purposes
- Drugs to treat obesity
- Experimental or investigational drugs
- Homeopathic drugs
- Over-the-counter drugs except insulin; prenatal vitamins; nicotine replacement therapy; and those specified in the UMP PDL
- Prescription drugs that have an over-the-counter equivalent product (identical active ingredients and strength) available in a comparable dosage form are not covered.

Please check the UMP *Certificate of Coverage* for certain exclusions, limitations, and prior authorization requirements that may apply to some medications.

| Tier (up to a 90-day supply per prescription or refill) | Enrollee's cost at a network retail pharmacy | Enrollee's cost using mail service pharmacy |
|---|---|--|
| Tier 1 Generic drugs ¹ , all insulin, and all disposable diabetic supplies | 20% coinsurance or enrollee cost-share limit ² , whichever is less | \$10 copay ³ |
| Tier 2 Preferred brand-name drugs | 30% coinsurance or enrollee cost-share limit ² , whichever is less | \$40 copay ³ |
| Tier 3 Nonpreferred brand-name drugs | 50% coinsurance Maximum cost-share limit does not apply | \$80 copay ³ |

1. Generic drugs have the same active ingredient(s) as brand name drugs no longer under patent and are usually less expensive. They are typically sold under an alternate brand name or the generic (chemical) name for that drug.
2. A cost-share limit based on the number of days' supply purchased applies to **Tier 1** and **Tier 2** drugs that are purchased from a **UMP network retail pharmacy**. Please refer to your **UMP 2005 Certificate of Coverage** for details.
3. If the actual price of the medication is less than the standard copay, you pay a minimum charge of \$8.99 or the cost of the drug, whichever is greater—but not more than the standard copay.

How to Use This Guide

This guide lists medications several ways to help you find prescription medications and their respective cost-share tiers. Section 1 lists commonly prescribed drugs by therapeutic category. Section 2 lists commonly prescribed nonpreferred drugs, along with possible preferred or generic alternatives that may be considered by your provider.

If your medication is not listed in either Section 1 or 2, you may consult the UMP Web site at www.ump.hca.wa.gov, or contact Member Services at **1-866-576-3862** for assistance.

In both sections that follow, drug names that are in all CAPITALS indicate a brand name; drug names all in lowercase are generic. In some cases, a generic drug will be marketed under a brand name; however, the Tier 1 generic coinsurance/copayment will apply as shown.

Section 1: Preferred Drugs by Therapeutic Class

This information is current at the time of printing and is subject to change.

02 ANTIINFECTIVES

Tier **2.1.1 CEPHALOSPORINS**

- 1 cefaclor
- 1 cefaclor er
- 1 cefadroxil 500mg
- 1 cefuroxime
- 1 cephalixin
- 1 cephadrine
- 2 CEFTIN ORAL SUSP
- 2 CEFZIL

Tier **2.1.4.1 OTHER MACROLIDES**

- 2 BIAXIN
- 2 BIAXIN XL
- 2 ZITHROMAX Oral Suspension
- 2 ZITHROMAX Tablets/Capsules

Tier **2.1.5 PENICILLINS**

- 1 amox tr/potassium clavulanate
- 1 amoxicillin
- 1 ampicillin
- 1 penicillin v potassium
- 2 AUGMENTIN XR

Tier **2.1.9 QUINOLONES**

- 1 ciprofloxacin oral suspension
- 1 ciprofloxacin oral tablets
- 2 AVELOX
- 2 AVELOX ABC PACK
- 2 TEQUIN

Tier **2.3 ORAL ANTIFUNGAL DRUGS**

- 1 clotrimazole troche
- 1 fluconazole oral tablets
- 1 fluconazole suspension
- 1 griseofulvin ultramicrosize
- 1 itraconazole
- 1 ketoconazole tablets
- 1 nystatin oral
- 2 ANCOPON
- 2 GRISEOFULVIN MICROSIZE
- 2 LAMISIL

Tier **2.4.2 OTHER TOPICAL ANTIFUNGALS**

- 1 ciclopirox 0.77% cream
- 1 econazole nitrate topical

- 1 ketoconazole topical
- 2 PENLAC

Tier **2.4.3 TOPICAL ANTIFUNGAL-CORTICOSTEROID COMBINATIONS**

- 1 clotrimazole-betamethasone
- 1 nystatin w/triamcinolone topical

Tier **2.5.1 ANTIRETROVIRAL AND PROTEASE INHIBITORS**

- 1 didanosine dr capsule
- 2 AGENERASE
- 2 COMBIVIR
- 2 CRIXIVAN
- 2 EMTRIVA
- 2 EPIVIR
- 2 FORTOVASE
- 2 HIVID
- 2 INVIRASE
- 2 KALETRA
- 2 LEXIVA
- 2 NORVIR
- 2 RESRIPTOR
- 2 RETROVIR
- 2 REYATAZ
- 2 SUSTIVA
- 2 TRIZIVIR
- 2 TRUVADA
- 2 VIDEX CHEWABLE TABLETS
- 2 VIDEX PEDIATRIC SUSPENSION
- 2 VIRACEPT
- 2 VIRAMUNE
- 2 VIREAD
- 2 ZERIT
- 2 ZIAGEN

Tier **2.5.2 OTHER ANTIVIRAL DRUGS**

- 1 acyclovir oral
- 1 amantadine
- 1 ganciclovir
- 1 rimantadine hcl
- 2 COPEGUS
- 2 CYTOVENE
- 2 DENAVIR
- 2 EPIVIR HBV
- 2 REBETOL
- 2 TAMIFLU
- 2 VALTREX

Tier **2.6 TOPICAL ANTIVIRAL DRUGS**

- 2 ZOVIRAX 5% OINTMENT

04 CARDIOVASCULAR MEDICATIONS

Tier **4.2 CALCIUM ANTAGONISTS**

- 1 cartia xt
1 diltia xt
1 diltiazem er
1 diltiazem hcl
1 felodipine
1 nicardipine hcl
1 nifedipine
1 nifedipine er
1 taztia xt
1 verapamil
2 NORVASC

Tier **4.3.1 LOOP DIURETICS**

- 1 bumetanide
1 furosemide
1 torsemide

Tier **4.3.2 THIAZIDE AND RELATED DRUGS**

- 1 chlorothiazide
1 chlorthalidone
1 hydrochlorothiazide
1 metolazone

Tier **4.3.3 POTASSIUM SPARING DIURETICS**

- 1 spironolactone
1 spironolactone w/hctz
1 triamterene w/hctz

Tier **4.4 BETA-ADRENERGIC ANTAGONIST DRUGS**

- 1 acebutolol hcl
1 atenolol
1 bisoprolol fumarate
1 metoprolol tartrate
1 nadolol
1 pindolol
1 propranolol hcl
2 COREG

Tier **4.5.2 CENTRALLY ACTING ANTIHYPERTENSIVES**

- 1 clonidine hcl
1 guanfacine hcl

- 1 methyldopa

Tier **4.5.4.1 ANGIOTENSIN CONVERTING ENZYME INHIBITORS**

- 1 benazepril
1 captopril
1 enalapril
1 fosinopril
1 lisinopril
2 ALTACE

Tier **4.5.4.2 ANGIOTENSIN II RECEPTOR ANTAGONISTS**

- 2 AVAPRO
2 DIOVAN

Tier **4.5.6 OTHER ANTIHYPERTENSIVES**

- 1 atenolol w/chlorthalidone
1 benazepril hcl-hctz
1 bisoprolol fumarate/hctz
1 captopril/hydrochlorothiazide
1 enalapril maleate/hctz
1 lisinopril-hctz
1 propranolol hcl w/hctz
2 AVALIDE
2 DIOVAN HCT
2 LOTREL

Tier **4.8.1 HYPOLIPOPROTEINEMICS**

- 1 colestyramine
1 colestyramine light
1 clofibrate
1 fenofibrate
1 gemfibrozil
2 COLESTID
2 LOFIBRA
2 NIASPAN
2 WELCHOL
2 ZETIA

Tier **4.8.2 HMG-COA REDUCTASE INHIBITORS**

- 1 lovastatin
2 LIPITOR
2 PRAVACHOL

Tier **4.8.2.1 HMG-COA COMBINATIONS**

- 2 ADVICOR

05 AUTONOMIC AND CNS MEDICATIONS

Tier **5.1.1.1 CLASS II NARCOTICS**

- 1 hydromorphone hcl
- 1 meperidine hcl
- 1 meperidine w/promethazine
- 1 methadone
- 1 morphine sulfate IR/SA/SR
- 1 oxycodone solution
- 1 oxycodone tablets
- 1 oxycodone w/acetaminophen
- 2 METHADONE SOLUTION

Tier **5.1.1.2 CLASS III NARCOTICS**

- 1 acetaminophen w/codeine #3
- 1 hydrocodone/acetaminophen
- 2 SUBOXONE

Tier **5.1.1.3 CLASS IV NARCOTICS**

- 1 propoxyphene hcl
- 1 propoxyphene hcl/apap

Tier **5.1.2 DRUGS TO PREVENT AND TREAT HEADACHES**

- 1 aspirin-caffeine-butalbital
- 1 butalbital/apap/caffeine
- 1 butalbital/caff/apap/codeine
- 1 butorphanol spray
- 1 dihydroergotamine
- 1 migergot suppositories
- 2 AMERGE
- 2 AXERT
- 2 CAFERGOT oral tablets
- 2 FROVA
- 2 IMITREX INJECTION
- 2 IMITREX NASAL SPRAY
- 2 IMITREX TABLET
- 2 MAXALT MLT
- 2 MIGRALAN
- 2 RELPAX
- 2 ZOMIG
- 2 ZOMIG ZMT

Tier **5.2.2 SEDATIVE / HYPNOTIC DRUGS**

- 1 chloral hydrate
- 1 estazolam
- 1 flurazepam hcl
- 1 midazolam hcl
- 1 temazepam
- 1 triazolam

- 2 AMBIEN
- 2 SONATA

Tier **5.4.2 ANTICONVULSANT BENZODIAZEPINES**

- 1 clonazepam
- 2 DIASTAT
- 2 KLONOPIK SUSPENSION

Tier **5.4.7 OTHER ANTICONVULSANTS**

- 1 gabapentin
- 2 FELBATOL
- 2 GABITRIL
- 2 KEPPRA
- 2 LAMICTAL
- 2 PARADIONE
- 2 PHENURONE
- 2 TOPAMAX
- 2 TRIDIONE
- 2 ZONEGRAN

Tier **5.5.1.3 SELECTIVE SEROTONIN REUPTAKE INHIBITORS**

- 1 citalopram
- 1 fluoxetine
- 1 fluvoxamine maleate
- 1 paroxetine hcl

Tier **5.5.1.4 OTHER ANTIDEPRESSANTS**

- 1 bupropion hcl
- 1 bupropion sr tablets
- 1 maprotiline hcl
- 1 mirtazapine
- 1 nefazodone hcl
- 1 trazodone

Tier **5.6 ANTIVERTIGO AND ANTIEMETIC DRUGS**

- 1 prochlorperazine
- 1 promethazine suppository
- 1 trimethobenzamide 250mg capsule
- 1 trimethobenzamide supp
- 2 ZOFRAN
- 2 ZOFRAN ODT

Tier **5.7.2 OTHER ANTI-PARKINSON DRUGS**

- 1 bromocriptine mesylate
- 1 carbidopa/levodopa
- 1 pergolide mesylate
- 1 selegiline hcl
- 2 COMTAN
- 2 LARODOPA

2 LODOSYN
2 MIRAPEX
2 REQUIP
2 STALEVO
2 TASMAR

1 fluticasone cream
1 fluticasone ointment
1 hc acetate 1% + pramoxine 1%
2 CLIOQUINOL/HC 1/0.5 CREAM
2 FS SHAMPOO

Tier **5.8 ANTIPSYCHOTIC DRUGS**

1 clozapine
1 fluphenazine hcl
1 haloperidol
2 ABILIFY
2 CLOZAPINE 12.5MG TABLET
2 MOBAN
2 PERMITIL
2 RISPERDAL
2 SERENTIL
2 SEROQUEL
2 ZYPREXA

Tier **6.3 ANTIACNE DRUGS**

1 clindamycin phosphate
1 erythromycin base topical soln
1 erythromycin-benzoyl peroxide gel
1 metronidazole 0.75% cream
1 tretinoin
2 AVITA Gel
2 BENZACLIN
2 METROLOTION
2 NOVACET
2 PLEXION
2 PLEXION SCT
2 PLEXION TS

Tier **5.9.1 CNS STIMULANT DRUGS**

1 amphetamine salt combo
1 dextroamphetamine sulfate
1 methylphenidate
1 methylphenidate er
2 ADDERALL XR
2 CONCERTA
2 METADATE CD
2 METADATE ER
2 PROVIGIL

Tier **6.7 KERATOLYTIC DRUGS**

1 podofilox
2 CONDYLOX GEL

Tier **6.9.2 TOPICAL DERMATOLOGICAL DRUGS**

1 fluorouracil 2% solution
1 granulderm
1 papain-urea
1 sulfur
1 urea
1 zinc stearate
2 ALDARA
2 EFUDEX 5% cream
2 ELIDEL
2 FLUOROPLEX
2 IODOSORB
2 OXSORALEN
2 REGRANEX

Tier **5.9.3 ANTIDEMENTIA DRUGS**

2 ARICEPT
2 COGNEX
2 EXELON
2 NAMENDA
2 REMINYL

Tier **5.9.6 OTHER DRUGS FOR ADHD**

2 STRATTERA

06 DERMATOLOGICAL MEDICATIONS

Tier **6.1 TOPICAL CORTICOSTEROID DRUGS**

1 betamethasone dipropionate
1 betamethasone dp augmented
1 betamethasone valerate
1 clobetasol e
1 clobetasol propionate
1 diflorasone diacetate
1 fluocinonide
1 fluocinonide-e

07 EAR NOSE THROAT MEDICATIONS

Tier **7.1 DRUGS AFFECTING THE EAR**

1 a/b otic
1 acetasol
1 acetasol hc
1 antibiotic ear solution
1 antibiotic ear suspension
1 antipyrine w/benzocaine
2 CIPRO HC OTIC SUSPENSION
2 CIPRODEX OTIC SUSPENSION

2 FLOXIN 0.3% EAR DROPS

Tier **7.2 DRUGS AFFECTING THE NOSE**

- 1 flunisolide
- 1 ipratropium 0.03% spray
- 1 ipratropium nasal spay
- 2 FLONASE
- 2 FLONASE AQ
- 2 NASACORT AQ
- 2 NASACORT HFA
- 2 NASONEX
- 2 VANCENASE
- 2 VANCENASE AQ
- 2 VANCENASE AQ DS

08 ENDOCRINE MEDICATIONS

Tier **8.1.1 INSULIN**

- 1 HUMALOG
- 1 HUMALOG MIX 75/25
- 1 HUMULIN 50/50
- 1 HUMULIN 70/30
- 1 HUMULIN L
- 1 HUMULIN N
- 1 HUMULIN R
- 1 HUMULIN U
- 1 NOVOLIN 70/30
- 1 NOVOLIN L
- 1 NOVOLIN N
- 1 NOVOLIN R
- 1 NOVOLOG
- 1 NOVOLOG MIX 70/30

Tier **8.1.2 ORAL HYPOGLYCEMICS & COMBOS**

- 1 glipizide
- 1 glipizide er
- 1 glyburide
- 1 glyburide micronized
- 1 glyburide-metformin hcl
- 1 metformin hcl
- 1 metformin hcl er
- 2 GLUCOVANCE
- 2 METAGLIP
- 2 PRECOSE

Tier **8.1.3 INSULIN SENSITIZERS & COMBOS**

- 2 AVANDAMET
- 2 AVANDIA

Tier **8.3.1 GLUCOCORTICOID DRUGS**

- 1 methylprednisolone
- 1 prednisolone 15mg/5ml soln

- 1 prednisolone syrup
- 1 prednisone
- 1 triamcinolone
- 2 CORTEF
- 2 CORTISONE ACETATE
- 2 DEXAMETHASONE 0.5MG/5ML LIQ
- 2 HYDROCORTONE 10MG TABLET
- 2 PREDNISONE 5MG/5ML SOLUTION

Tier **8.4.1 THYROID SUPPLEMENTS**

- 1 levothroid
- 1 levothyroxine sodium
- 1 levoxyl
- 1 unithroid
- 2 CYTOMEL
- 2 THYROID STRONG
- 2 THYROLAR-1
- 2 THYROLAR-1/2
- 2 THYROLAR-1/4
- 2 THYROLAR-2
- 2 THYROLAR-3

Tier **8.6 OTHER ENDOCRINE DRUGS**

- 1 calcitonin
- 1 desmopressin acetate 0.1mg/ml spray
- 2 ACTONEL
- 2 CEREZYME
- 2 CYTADREN
- 2 DDAVP TABLETS
- 2 DIDRONEL
- 2 DOSTINEX
- 2 FABRAZYME
- 2 FORTEO
- 2 FOSAMAX
- 2 FOSAMAX ORAL SOLUTION
- 2 STIMATE
- 2 ZAVESCA
- 2 ZOMETTA

09 GASTROINTESTINAL MEDICATIONS

Tier **9.3 ANTISPASMODICS / DRUGS AFFECT GI**

- 1 belladonna
- 1 belladonna w/phenobarbital
- 1 clidinium w/chlordiazepoxide
- 1 dicyclomine hcl
- 1 hyoscyamine
- 1 hyoscyamine compound
- 1 metoclopramide hcl
- 2 BARBIDONNA
- 2 COLYTROL

2 METOCLOPRAMIDE HCL INTENSOL
2 PROPANTHELINE BROMIDE

Tier **9.4 ANTIULCER DRUGS**

1 famotidine 40mg
1 nizatidine
1 ranitidine (strength > 150 mg)
2 PEPCID 40MG/5ML ORAL SUSP
2 ZANTAC 15MG/ML SYRUP

Tier **9.4.1 OTHER ANTIULCER DRUGS**

1 misoprostol
1 sucralfate
2 CARAFATE 1GM/10ML SUSP

Tier **9.4.2 PROTON PUMP INHIBITORS**

1 omeprazole RX 20mg capsules
1 PRILOSEC OTC
2 PREVACID

Tier **9.4.3 HELICOBACTER PYLORI DRUGS**

2 PREVPAC

Tier **9.6 OTHER GI DRUGS**

1 pancrelipase
1 peg 3350/electrolyte
1 proctocare-hc
1 proctozone-hc
1 sulfasalazine
1 ursodiol
2 ASACOL
2 CANASA
2 CORTIFOAM
2 COTAZYM
2 COTAZYM-S
2 CREON
2 CREON 10
2 CREON 20
2 PENTASA
2 PROCTOFOAM-HC
2 SUCRAID
2 URSO

10 IMMUNOLOGICALS

Tier **10.2.3 INTERFERONS**

2 ALFERON N
2 AVONEX
2 BETASERON
2 INFERGEN
2 INTRON A

2 PEGASYS
2 PEG-INTRON
2 PEG-INTRON REDIPEN
2 REBETRON
2 REBIF
2 ROFERON-A

Tier **10.2.4 GROWTH HORMONES AND RELATED DRUGS**

2 GENOTROPIN
2 GEREFT
2 HUMATROPE
2 NORDITROPIN
2 NUTROPIN
2 NUTROPIN AQ
2 NUTROPIN DEPOT
2 PROTROPIN
2 SAIZEN

Tier **10.2.5 INTERLEUKINS**

2 NEUMEGA
2 PROLEUKIN

Tier **10.2.6 INTERLEUKIN RECEPTOR ANTAGONIST**

2 KINERET

11 MUSCULOSKELETAL MEDICATIONS

Tier **11.1.1 SALICYLATES AND RELATED DRUGS**

1 diflunisal
1 salsalate

Tier **11.1.2 NON-STEROIDAL ANTIINFLAMMATORY**

1 diclofenac potassium
1 diclofenac sodium
1 etodolac
1 fenoprofen
1 flurbiprofen
1 ibuprofen 400, 600,800mg
1 indomethacin
1 ketoprofen
1 ketorolac tromethamine
1 meclofenamate sodium
1 nabumetone
1 naproxen
1 oxaprozin
1 piroxicam
1 sulindac

- 1 tolmetin sodium
2 ARTHROTEC

Tier **11.1.4 OTHER DRUGS FOR ARTHRITIS**

- 2 CUPRIMINE
2 RIDAURA

Tier **11.3.1 DIRECT MUSCLE RELAXANTS**

- 1 baclofen
1 tizanidine hcl

Tier **11.3.2 CNS MUSCLE RELAXANTS**

- 1 cyclobenzaprine hcl
1 methocarbamol
1 methocarbamol w/aspirin
1 orphenadrine citrate

12 NUTRION, BLOOD MODIFIERS

Tier **12.3.1 ORAL ANTICOAGULANTS,
VITAMIN K**

- 1 warfarin

Tier **12.3.2 INJECTABLE ANTICOAGULANTS**

- 2 ARIXTRA
2 FRAGMIN
2 LOVENOX

Tier **12.4 ANTIPLATELET DRUGS**

- 1 dipyridamole
1 ticlopidine
2 AGGRENOX
2 PLAVIX

Tier **12.7 BLOOD DETOXICANTS**

- 1 enulose
1 lactulose
2 RENAGEL

13 OBSTETRICAL & GYNECOLOGICAL MEDICATIONS

Tier **13.1.2 SPECIALIZED OB / GYN DRUGS**

- 1 isoxsuprime hcl
1 leuprolide acetate
2 CETROTIDE
2 SYNAREL

Tier **13.3 ANDROGEN DRUGS**

- 1 danazol
1 fluoxymesterone
1 testosterone cypionate
1 testosterone enanthate
2 ANDRODERM
2 METHYLTESTOSTERONE
2 TESTIM
2 WINSTROL

Tier **13.4 ESTROGEN DRUGS**

- 1 estradiol oral tablets
2 MENEST
2 PREMARIN VAGINAL CREAM

Tier **13.4.1 ESTROGEN / PROGESTIN
COMBINATION**

- 2 PREMPRO

Tier **13.5 PROGESTIN DRUGS**

- 1 medroxyprogesterone acetate
1 norethindrone acetate
2 PROGESTERONE
2 PROMETRIUM

Tier **13.7 CONTRACEPTIVES**

- 1 apri
1 aranelle
1 aviane
1 cryselle
1 desogestrel/ethinyl estradiol
1 empresse
1 junel
1 junel fe
1 kariva
1 lessina
1 levora
1 medroxyprogesterone depot
1 microgestin
1 microgestin fe
1 mononessa
1 necon
1 nortrel
1 ogestrel
1 portia
1 previfem
1 sprintec
1 trinesia
1 tri-previfem
1 tri-sprintec
1 trivora-28
1 zovia

- 2 CYCLESSA
- 2 NUVARING
- 2 ORTHO EVRA
- 2 ORTHO-TRICYCLEN LO
- 2 PLAN B
- 2 YASMIN 28

14 OPHTHALMIC MEDICATIONS

Tier **14.1.1 OPHTHALMIC TOPICAL ANTIBACTERIAL**

- 1 bacitracin ophth
- 1 bacitracin zinc & polymyxin-b ophth
- 1 chloramphenicol ophth
- 1 ciprofloxacin 0.3% ophthalmic drops
- 1 erythromycin eye ointment
- 1 gentamicin ophth
- 1 neomycin/bacitracin/polymyxin ophth
- 1 neomycin/polymyxin/gramicidin ophth
- 1 ofloxacin 0.3% eye drops
- 1 polycidin
- 1 sulfacetamide 10% eye drops
- 1 tobramycin 0.3% eye drops
- 1 triple antibiotic eye oint
- 2 CHLOROMYCETIN EYE OINTMENT
- 2 CILOXAN 0.3% ophthalmic ointment
- 2 SULFACETAMIDE 10% EYE OINT
- 2 VASOSULF
- 2 VIGAMOX
- 2 ZYMAR

Tier **14.1.2 OPHTHALMIC TOPICAL ANTIVIRAL DRUGS**

- 1 trifluridine
- 2 VIRA-A

Tier **14.2 OPHTHALMIC CORTICOSTEROID DRUGS**

- 1 dexamethasone sodium phosphate
- 1 fluorometholone 0.1% drops
- 1 isolone forte
- 1 prednisolone acetate
- 1 prednisolone sodium phosphate
- 2 FML S.O.P OINTMENT
- 2 HMS
- 2 LOTEMAX
- 2 PRED MILD

Tier **14.3 OPHTHALMIC ANTIINFECTIVE / CORTICOSTEROID**

- 1 dexasporin
- 1 neomycin w/dexamethasone
- 1 neomycin/bacitracin/poly/hc

- 1 neomycin/polymyxin/dexameth
- 1 neomycin/polymyxin/hc
- 1 sulfacetamide w/prednisolone
- 1 triple antibiotic hc
- 2 FML-S
- 2 POLY-PRED
- 2 PRED-G
- 2 TOBRADEX
- 2 VASOCINE
- 2 ZYLET DROPS

Tier **14.5 ANTIGLAUCOMA DRUGS**

- 1 acetazolamide
- 1 betaxolol hcl
- 1 brimonidine tartrate
- 1 carteolol hcl
- 1 dipivefrin hcl
- 1 levobunolol hcl
- 1 methazolamide
- 1 metipranolol
- 1 pilocarpine hcl
- 1 timolol eye drops
- 2 AZOPT
- 2 BETOPTIC S
- 2 COSOPT
- 2 ISOPTO CARBACHOL 0.75% DROPS
- 2 PHOSPHOLINE IODIDE
- 2 PHYSOSTIGMINE SULFATE
- 2 PILOPINE HS
- 2 TRAVATAN
- 2 TRUSOPT
- 2 XALATAN

15 RESPIRATORY MEDICATIONS

Tier **15.1.1 BETA-2 ADRENERGIC DRUGS**

- 1 albuterol
- 1 metaproterenol 0.4% soln
- 1 terbutaline sulfate
- 2 BRETHAIRE
- 2 BRONKOSOL
- 2 EPHEDRINE SULFATE
- 2 FORADIL
- 2 ISOETHARINE HCL
- 2 MAXAIR
- 2 MAXAIR AUTOHALER
- 2 PROVENTIL 4MG REPETABS
- 2 SEREVENT DISKUS

Tier **15.1.3 OTHER DRUGS FOR ASTHMA**

- 1 acetylcysteine
- 1 cromolyn sodium nebulizer solution
- 1 epinephrine

- | | |
|---|------------------------------|
| 1 | water for inhalation vial |
| 2 | ADVAIR DISKUS |
| 2 | AEROBID |
| 2 | AEROBID-M |
| 2 | ANA-GUARD |
| 2 | ANA-KIT |
| 2 | AZMACORT |
| 2 | COMBIVENT |
| 2 | DUONEB |
| 2 | EPI E-Z PEN |
| 2 | EPIPEN |
| 2 | EPIPEN JR. |
| 2 | FLOVENT HFA |
| 2 | FLOVENT ROTADISK |
| 2 | GASTROCROM |
| 2 | INTAL INHALER |
| 2 | PULMICORT RESPULE |
| 2 | QVAR |
| 2 | SPIRIVA |
| 2 | TILADE |
| 1 | tridal-hd |
| 1 | uni-hist dm drops |
| 1 | uni-hist dm syrup |
| 1 | uni-hist pdx drops |
| 1 | uni-hist pdx syrup |
| 2 | AMBENYL |
| 2 | CODEFEN |
| 2 | CORDRON-HC LIQUID |
| 2 | DIMETANE-DC |
| 2 | DIMETANE-DX |
| 2 | HYDRO-TUSSIN DM LIQUID |
| 2 | PHENERGAN VC W/CODEINE |
| 2 | PHENERGAN W/DEXTROMETHORPHAN |
| 2 | RINDAL HD |
| 2 | TUSSIONEX |

Tier **15.4 OTHER RESPIRATORY DRUGS**

- 2 PULMOZYME
-

16 UROLOGICAL MEDICATIONS

Tier **16.1.1 ANTICHOLINERGIC
ANTISPASMODICS**

- 1 oxybutynin chloride

Tier **16.1.4 OTHER GENITOURINARY
PRODUCTS**

- 2 AVODART
- 2 CYSTADANE
- 2 ELMIRON
- 2 FLOMAX
- 2 IRRIGATING SOLUTION G
- 2 PROSCAR
- 2 RENACIDIN

Tier **15.1.4 LEUKOTRIENE MODIFIERS**

- 2 SINGULAIR

Tier **15.3 ANTITUSSIVE AND EXPECTORANT**

- 1 benzonatate
- 1 bromhist-dm syrup
- 1 bromhist-pdx drops
- 1 bromhist-pdx syrup
- 1 codafe'd
- 1 crantex er capsules
- 1 crantex hc syrup
- 1 crantex la tablet
- 1 crantex lac capsule
- 1 crantex liquid
- 1 expect
- 1 guaifen-dextrom-pseudoephedrin
- 1 guaifenesin / pseudoephedrine sr tablets
- 1 guaifenesin /phenylephrine
- 1 guaifenesin w/codeine
- 1 histinex hc
- 1 histinex pv
- 1 hydrocodone
- 1 hydrocodone w/guaifenesin
- 1 hydrocodone/homatropine
- 1 hydrocodone/phenyleph/pyrilam
- 1 hydrocodone/phenylephrine/cpm
- 1 hydro-tussin dhc syrup
- 1 hydro-tussin exp syrup
- 1 hydro-tussin hc syrup
- 1 hydro-tussin hd solution
- 1 hydro-tussin xp liquid
- 1 promethazine dm
- 1 promethazine w/codeine

Section 2: Possible Alternatives for Nonpreferred or Tier 3 Drugs

The following is a list of some nonpreferred medications with examples of selected alternatives that are on the UMP Preferred Drug List.

Column 1 lists commonly-prescribed nonpreferred medications.

Column 2 lists some preferred or generic alternatives that may be right for you. Please discuss these with your provider.

| <i>Drug Name</i> | <i>SUGGESTED or PREFERRED alternative</i> |
|----------------------------|--|
| ACCOLATE | SINGULAIR |
| ACCUPRIL | benazepril, captopril, enalapril, lisinopril, ALTACE |
| ACCURETIC | benazepril hcl/hctz, captopril/hctz, enalapril maleate/hctz, lisinopril/hctz |
| ACEON | benazepril, captopril, enalapril, lisinopril, ALTACE |
| ACIPHEX | OTC omeprazole, PREVACID |
| ACLOVATE | OTC hydrocortisone |
| ACTIGALL | ursodiol |
| ACTIVELLA | estradiol, MENEST |
| ACTOS | AVANDIA |
| ADALAT CC | nifedipine er |
| ADDERALL | amphetamine salt combo |
| ALESSE | aviane, lessina |
| ALORA PATCH | estradiol, MENEST |
| ALPHAGAN | brimonidine tartrate |
| ALPHAGAN P | brimonidine tartrate |
| ALREX | dexamethsone, prednisolone, LOTELEX |
| ALTOCOR/ALTOPREV | lovastatin, PRAVACHOL, LIPITOR |
| AMARYL | glyburide |
| ANASPAZ | hyoscyamine |
| ANDROGEL | TESTIM, ANDRODERM |
| ANUSOL-HC | hemorrhoidal w/hc cream |
| ANZEMET | ZOFRAN |
| ARMOUR THYROID | levoxyl |
| ASTELIN READY SPRAY | FLONASE, NASACORT AQ, NASONEX, VANCENAZ |
| ATACAND | AVAPRO, DIOVAN |
| ATACAND HCT | AVALIDE, DIOVAN HCT |
| ATROVENT NASAL SPRAY | ipratropium nasal spray |
| AVAR | PLEXION SCT |
| AVAR-E | PLEXION SCT |
| AVINZA | methadone, oramorph sr, morphine sr |
| AVITA Cream | tretinoin |
| AYGESTIN | norethindrone acetate |
| BECLOVENT | QVAR |
| BECONASE | VANCENAZ |
| BECONASE AQ | VANCENAZ AQ |
| BENICAR | AVAPRO, DIOVAN |
| BENICAR HCT | AVALIDE, DIOVAN HCT |
| BENZAGEL WASH | OTC benzoyl peroxide |
| BENZAMYCIN GEL | erythromycin-benzoyl peroxide gel |
| BLOCADREN | timolol |
| BONIVA | ACTONEL, FOSAMAX |

| <i>Drug Name</i> | <i>SUGGESTED or PREFERRED alternative</i> |
|-------------------------------------|--|
| BUMEX | bumetanide |
| CAFERGOT suppositories | migergot suppositories |
| CAPEX SHAMPOO | selenium sulfide 2.5% shampoo |
| CARTROL | atenolol, metoprolol, nadolol, pindolol, propranolol, timolol, COREG |
| CATAFLAM | diclofenac potassium |
| CELEBREX | diclofenac, etodolac, ibuprofen, ketoprofen, nabumetone, naproxen, oxaprozin, piroxicam, salsalate, sulindac |
| CELEXA | citalopram |
| CENESTIN | estradiol, MENEST |
| CERUMENEX | OTC DEBROX, MURINE EAR |
| CHIBROXIN | ciprofloxacin 0.3% ophthalmic drops, ofloxacin 0.3% ophthalmic drops |
| CILOXAN 0.3% ophthalmic drops | ciprofloxacin 0.3% ophthalmic drops |
| CIPRO ORAL SUSPENSION | ciprofloxacin oral suspension |
| CIPRO ORAL TABLETS | ciprofloxacin oral tablets |
| CIPRO XR ORAL TABLETS | ciprofloxacin oral tablets |
| CLEOCIN T | clindamycin phosphate |
| CLIMARA | estradiol, MENEST |
| CLINDETS | clindamycin phosphate |
| CLOBEVADE | clobetasol propionate |
| CLODERM | betamethasone, triamcinolone, FLUCINOLONE |
| CLOZARIL | clozapine |
| CODICLEAR DH | guaifenesin /hydrocodone |
| COLYTE | peg 3350/electrolyte |
| COMBIPATCH | estradiol, MENEST |
| CONDYLOX TOPICAL SOLN | podofilox |
| CORDRAN | betamethasone, triamcinolone, FLUCINOLONE |
| CORDRAN SP | betamethasone, triamcinolone, FLUCINOLONE |
| CORDRAN TAPE/PATCH | betamethasone, triamcinolone, FLUCINOLONE |
| CORDRON-DM LIQUID | CORDRON-HC LIQUID |
| COUMADIN | warfarin |
| COZAAR | AVAPRO, DIOVAN |
| CRESTOR | lovastatin, PRAVACHOL, LIPITOR |
| CYMBALTA | bupropion, bupropion SR, citalopram, fluoxetine, mirtazapine, paroxetine |
| D.H.E. 45 | dihydroergotamine |
| DANTRIUM | cyclobenzaprine, methocarbamol |
| DDAVP 0.01% NASAL SOLUTION | desmopressin acetate spray |
| DECONSAL C expectorent | guaifenesin /hydrocodone |
| DECONSAL II CAPSULE | crantex lac capsules |
| DELATESTRYL | testosterone enanthate |
| DELESTROGEN | valergen - 20 |
| DEMULEN | zovia |
| DEMULEN 1/35-28 | ZOVIA 1/35E |
| DEMULEN 1/50-21 | ZOVIA 1/50E |
| DEMULEN 1/50-28 | ZOVIA 1/50E |
| DEPO SUBQ PROVERA | medroxyprogesterone depot |
| DEPO-PROVERA | medroxyprogesterone depot |
| DEPO-TESTOSTERONE | testosterone cypionate |

| <i>Drug Name</i> | <i>SUGGESTED or PREFERRED alternative</i> |
|--------------------------------|--|
| DERMASMOOTH FS ATOPIC | fluocinolone |
| DETROL | oxybutynin chloride |
| DETROL LA | oxybutynin chloride |
| DEXEDRINE | dextroamphetamine sulfate |
| DEXTROSTAT | dextroamphetamine sulfate |
| DIFFERIN | tretinoin |
| DIFLUCAN oral suspension | fluconazole suspension |
| DIFLUCAN oral tablets | fluconazole oral tablets |
| DILAUDID | hydromorphone hcl |
| DIPROLENE | betamethasone, clobetasol |
| DIPROLENE AF | betamethasone, clobetasol |
| DITROPAN | oxybutynin chloride |
| DITROPAN XL | oxybutynin chloride |
| DRYSOL | aluminum chloride |
| DURAGESIC | methadone, oramorph sr, morphine sr |
| DURICEF CAPSULE | cefadroxil |
| DYAZIDE | triamterene w/hctz |
| DYNABAC | BIAXIN/XL, ZITHROMAX |
| EFFEXOR | bupropion, bupropion SR, citalopram, fluoxetine, mirtazapine, paroxetine |
| EFFEXOR XR | bupropion, bupropion SR, citalopram, fluoxetine, mirtazapine, paroxetine |
| EFUDEX topical solution | fluorouracil topical solution |
| ELDEPRYL | selegiline hcl |
| EMGEL | erythromycin base topical soln |
| ESCLIM | estradiol, MENEST |
| ESGIC | butalbital/apap/caffeine |
| ESGIC-PLUS | butalbital/apap/caffeine |
| ESTRACE TABLETS | estradiol, MENEST |
| ESTRACE VAGINAL CREAM | PREMARIN VAGINAL CREAM |
| ESTRADERM | estradiol, MENEST |
| ESTRASORB | Premarin Vaginal Cream |
| ESTRATAB | estradiol, MENEST |
| ESTRATEST | estradiol, MENEST |
| ESTRATEST H.S. | estradiol, MENEST |
| ESTRING | estradiol, MENEST |
| ESTROGEL | Premarin Vaginal Cream |
| EXELDERM | econazole, ketoconazole, PENLAC |
| FACTIVE | ciprofloxacin, ofloxacin, AVELOX, TEQUIN |
| FAMVIR | acyclovir, VALTREX |
| FEMHRT | estradiol, MENEST |
| FEMPATCH | estradiol, MENEST |
| FEMRING | estradiol, MENEST |
| FLUMADINE | RIMANTADINE HCL |
| GENTACIDIN | gentamicin ophth |
| GEODON | ABILFY, RISPERDAL, SEROQUL, ZYPRXA |
| GFN 1000/DM 50 | guia-d sa tablet |
| GLUCOPHAGE | metformin hcl |

| <i>Drug Name</i> | <i>SUGGESTED or PREFERRED alternative</i> |
|----------------------------------|---|
| GLUCOPHAGE XR | metformin er |
| GLUCOTROL | glipizide |
| GLUCOTROL XL | glipizide |
| GLYNASE | glyburide |
| GLYSET | glyburide, glipizide |
| GRIFULVIN V | griseofulvin |
| GYNODIOL | estradiol, MENEST |
| HALCION | triazolam |
| HALOG | betamethasone dip/val, desoxymetisone |
| HALOG-E | betamethasone dip/val, desoxymetisone |
| HELIDAC | PREVPAC |
| HYCOFED | histinex pv |
| HYCOMINE COMPOUND | histinex hc |
| HYZAAR | AVALIDE, DIOVAN HCT |
| IB STAT oral solution | hyocystamine |
| INTAL NEBULIZER SOLUTION | cromolyn sodium nebulizer solution |
| KADIAN | methadone, oramorph sr, morphine sr |
| KERLONE | atenolol, metoprolol, nadolol, pindolol, propranolol, timolol, COREG |
| KYTRIL ORAL SOLUTION | ZOFRAN |
| KYTRIL TABLETS | ZOFRAN |
| LESCOL | lovastatin, PRAVACHOL, LIPITOR |
| LESCOL XL | lovastatin, PRAVACHOL, LIPITOR |
| LEVAQUIN | ciprofloxacin, ofloxacin, AVELOX, TEQUIN |
| LEVATOL | penbutalol |
| LEVLEN | levora, portia |
| LEVLITE | aviane, lessina |
| LEXAPRO | bupropion, bupropion SR, citalopram, fluoxetine, mirtazapine, paroxetine |
| LO/OVRAL | cryselle |
| LOCOID | betamethasone, triamcinolone, FLUCINOLONE |
| LOESTRIN | junel |
| LOESTRIN FE | NORETH A-ET ESTRA/FE FUMARATE |
| LOPROX | ciclopirox 0.77% cream |
| LORABID | amoxicillin/clavulanate, cefuroxime |
| LUMIGAN | TRAVATAN, XALATAN |
| LUNESTA | flurazepam, triazolam, estazolam, temazepam, AMBIEN, SONATA |
| LUPRON non-depot | leuprolide acetate |
| MAVIK | benazepril, captopril, enalapril, lisinopril, ALTACE |
| MAXAQUIN | ciprofloxacin, ofloxacin, AVELOX, TEQUIN |
| MIACALCIN 200U NASAL SPRAY | ACTONEL, FOSAMAX |
| MICARDIS | AVAPRO, DIOVAN |
| MICARDIS HCT | AVALIDE, DIOVAN HCT |
| MICRONOR | norethindrone acetate |
| MIDRIN | isometh/d-chloralphenaz/apap |
| MIRCETTE | kariva |
| MOBIC | diclofenac, etodaolac, ibuprofen, ketoprofen, nabumetone, naproxen, oxaprozin, piroxicam, salsalate, sulindac |
| MUCOMYST | acetylcysteine |

| <i>Drug Name</i> | <i>SUGGESTED or PREFERRED alternative</i> |
|---------------------------------|--|
| MYCELEX TROCHE | clotrimazole troche |
| NASALIDE | FLONASE, NASACORT AQ, NASONEX, VANCENASE |
| NASAREL | FLONASE, NASACORT AQ, NASONEX, VANCENASE |
| NEURONTIN | gabapentin |
| NEXIUM | OTC omeprazole, PREVACID |
| NICOSYN | sodium sulfacetamide/sulfur |
| NIZORAL 2% SHAMPOO | ketoconazole topical |
| NIZORAL cream | ketoconazole cream |
| NIZORAL tablets | ketoconazole tablets |
| NORDETTE | levora, portia |
| NORETHIN | necon 1/35, 1/50, notrel 1/35 |
| NORFLEX | cyclobenzaprine, methocarbamol |
| NORGESIC | orphenadrine compound |
| NORGESIC FORTE | orphenadrine compound forte |
| NORINYL 1/35 & 1/50 | necon |
| NORMODYNE | labetalol hcl |
| NOROXIN | ciprofloxacin, ofloxacin, AVELOX, TEQUIN |
| NULYTLY | peg 3350/electrolyte |
| OCUFLOX | ofloxacin |
| OGEN | estradiol, MENEST |
| ORTHO MICRONOR | norethindrone acetate |
| ORTHO TRI-CYCLEN | trinessa, tri-previfem, tri-sprintec |
| ORTHO-CEPT | apri |
| ORTHO-CYCLEN | mononessa, previfem, sprintec |
| ORTHO-DIENESTROL | Premarin Vaginal Cream |
| ORTHO-EST | estradiol, MENEST |
| ORTHO-NOVUM | necon, nortel |
| ORTHO-PREFEST | estradiol, MENEST |
| OVRAL | ogestrel |
| OVRETTE | norethindrone acetate |
| OXYCONTIN | methadone, oramorph sr, morphine sr |
| PANCREASE | amylase/lipase/protease |
| PANCREASE MT | amylase/lipase/protease |
| PAXIL | paroxetine hcl |
| PAXIL 10MG/5ML SUSPENSION | bupropion, bupropion SR, citalopram, fluoxetine, mirtazapine, paroxetine |
| PAXIL CR | paroxetine hcl |
| PEXEVA | paroxetine |
| PHENERGAN suppository | promethazine suppository |
| PLENDIL | nifedpine er, NORVASC |
| PLETAL | cilostazol |
| PONSTEL | meclofenamate sodium |
| PRANDIN | glyburide, glipizide |
| PRAVIGARD PAC | PRAVACHOL, aspirin |
| PREFEST | estradiol, MENEST |
| PRELONE | prednisolone |
| PREMARIN TABLETS | estradiol, MENEST |
| PREMPHASE | estradiol, MENEST |

| <i>Drug Name</i> | <i>SUGGESTED or PREFERRED alternative</i> |
|---------------------------------|---|
| PRILOSEC 20mg & 40 mg | OTC omeprazole, PREVACID |
| PROCTOSOL-HC | proctozone-hc |
| PROMETHEGAN suppositories | promethazine suppositories |
| PROTONIX | OTC omeprazole, PREVACID |
| PROTOPIC | ELIDEL |
| PROVENTIL HFA | albuterol |
| PROVERA | medroxyprogesterone acetate |
| PROZAC | fluoxetine |
| PROZAC WEEKLY | fluoxetine |
| PSORCON | diflorasone diacetate |
| PSORCON E | diflorasone, betamethasone dip/val |
| PULMICORT TURBUHALER | AEROBID, AEROBID-M, AZMACORT, FLOVENT-HFA, FLOVENT ROTADISK, PULMICORT RESPULES, QVAR |
| QUESTRAN | cholestyramine |
| QUESTRAN LIGHT | cholestyramine light |
| RELENZA | TAMIFLU |
| REMERON SOLTAB | mirtazapine |
| REMERON TABLET | mirtazapine |
| RESCULA | TRAVATAN, XALATAN |
| RHINOCORT | FLONASE, NASACORT AQ, NASONEX, VANCENASE |
| RHINOCORT AQUA | FLONASE, NASACORT AQ, NASONEX, VANCENASE |
| RIOMET | metformin hcl |
| RISPERDAL M-TAB | RISPERDAL NON M-TAB |
| ROWASA rectal suspension | mesalamine rectal suspension |
| ROXANOL | morphine sulfate |
| ROXANOL SOLUTION | morphine sulfate |
| ROXICODONE INTENSOL | oxycodone hcl |
| ROXICODONE SOLUTION | oxycodone hcl |
| ROXICODONE TABLET | oxycodone tablets |
| SARAFEM | fluoxetine |
| SERZONE | nefazodone hcl |
| SPECTAZOLE | econazole nitrate topical |
| SPECTRACEF | amoxicillin/clavulanate, cefuroxime |
| SPORANOX | itraconazole |
| STADOL NS | butorphanol spray |
| STARLIX | glyburide, glipizide |
| SUPRAX | amoxicillin/clavulanate, cefuroxime |
| SYNTHROID | levothyroxine, levoxy |
| TARKA | LOTREL |
| TECZEM | LOTREL |
| TEMOVATE | clobetasol propionate |
| TEMOVATE EMOLlient | clobetasol propionate |
| TESSALON | benzonatate |
| TESSALON PERLE | benzonatate |
| TESTODERM | ANDRODERM, TESTIM |
| TESTODERM TTS | ANDRODERM, TESTIM |
| TEVETEN | AVAPRO, DIOVAN |
| TEVETEN HCT | AVALIDE, DIOVAN HCT |

| <i>Drug Name</i> | <i>SUGGESTED or PREFERRED alternative</i> |
|---------------------------------|--|
| TIAMATE | diltiazem xr |
| TICLID | ticlopidine |
| TOPICORT | betamethasone, hydrocortisone, triamcinolone |
| TOPICORT LP | desoxymetisone |
| TOPROL XL | atenolol, metoprolol, nadolol, pindolol, propranolol, timolol, COREG |
| TRANDATE | labetalol hcl |
| TRANSDERM-SCOP | OTC meclizine, dimenhydrinate |
| TRICOR | gemfibrozil |
| TRIDESILON OINTMENT | desonide |
| TRI-LEVLEN | trivora |
| TRILISATE | choline mag trisalicylate |
| TRINASAL | FLONASE, NASACORT AQ, NASONEX, VANCENASE AQ |
| TRI-NORINYL | aranelle |
| TRIPHASIC | trivora |
| TRITEC | PREVPAC |
| TROVAN | ciprofloxacin, ofloxacin, AVELOX, TEQUIN |
| TYLENOL W/CODEINE NO.3 | acetaminophen-codeine #3 |
| TYLOX | oxycodone w/acetaminophen |
| UNIRETIC | moexipril/hctz |
| UNIVASC | benazepril, captopril, enalapril, lisinopril, ALTACE |
| VAGIFEM | estradiol, MENEST |
| VANCERIL | QVAR |
| VANCERIL DOUBLE STRENGTH | QVAR |
| VANTIN | amoxicillin/clavulanate, cefuroxime |
| VASCOR | diltiazem er, nifedipine er, NORVASC |
| VASOTEC | enalapril |
| VENTOLIN HFA | albuterol inh, MAXAIR, PROVENTIL HFA |
| VEXOL | dexamethsone, prednisolone, LOTELEX |
| VIDEX EC | didanosine dr capsule |
| VIROPTIC | trifluridine |
| VISKEN | pindolol |
| VIVELLE | estradiol, MENEST |
| VIVELLE-DOT | estradiol, MENEST |
| VOLMAX | VOSPIRE ER TABS |
| WELLBUTRIN | bupropion hcl |
| WELLBUTRIN SR | bupropion SR |
| WELLBUTRIN XL | bupropion, bupropion SR |
| ZAGAM | ciprofloxacin, ofloxacin, AVELOX, TEQUIN |
| ZANAFLEX | baclofen |
| ZANTAC (strength > 150mg) | ranitidine |
| ZAROXOLYN | metolazone |
| ZEGERID 20mg | OTC omeprazole, PREVACID |
| ZOCOR | lovastatin, PRAVACHOL, LIPITOR |
| ZOLOFT | bupropion, bupropion SR, citalopram, fluoxetine, mirtazapine, paroxetine |
| ZOMIG NASAL SPRAY | AMERGE, AXERT, FROVA, IMITREX, IMITREX INJ, IMITREX NS, MAXALT-MLT, ZOMIG, ZOMIG-ZMT |
| ZOVIRAX | acyclovir |

| <i>Drug Name</i> | <i>SUGGESTED or PREFERRED alternative</i> |
|-------------------------|--|
| ZYFLO | SINGULAIR |
| ZYMASE | COTAZYM |
| ZYPREXA ZYDIS | ZYPREXA (NON-ZYDIS) |